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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/043,884	
	Filing Date	January 9, 2002	
	First Named Inventor	Furse et al.	
	Group Art Unit	2857	
	Examiner Name	BARAN, Mary C.	
Total Number of Pages in This Submission (including this sheet)	30	Attorney Docket No.	2008.USU.NP

<b>ENCLOSURES (check all that apply)</b>			
<input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Appeal Communication: <input type="checkbox"/> Appeal Notice <input type="checkbox"/> Appeal Brief <input type="checkbox"/> Reply Brief <input type="checkbox"/> Assignment with Cover Sheet <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Check in the amount of \$____ <input checked="" type="checkbox"/> Credit card authorization in the amount of \$ <u>55.00</u> <input type="checkbox"/> Declaration & Power of Attorney <input type="checkbox"/> Drawings ____ sheets <input type="checkbox"/> Formal <input type="checkbox"/> Informal	<input checked="" type="checkbox"/> Extension of Time Request <u>1</u> month <input type="checkbox"/> Fee Calculation Table <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form 1449 <input type="checkbox"/> Copies of IDS References <input type="checkbox"/> Issue Fee Transmittal & Advance Order	<input type="checkbox"/> Maintenance Fee Transmittal ____ year <input type="checkbox"/> Missing Parts Response <input type="checkbox"/> Notification of Change of Attorney Address & Docket Number <input checked="" type="checkbox"/> Return Postcard <input type="checkbox"/> Revocation & Power of Attorney <input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Other: <u>2 pages of application as filed, showing our copy of claims 19 and 20</u>	Remarks
<b>SIGNATURE OF APPLICANT, ATTORNEY OR AGENT</b>			
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Signature	<u>David W. O'Bryant</u>	Date	<u>9/27/04</u>
<b>CERTIFICATE OF MAILING UNDER 37 CFR § 1.8</b>			
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail, on the date indicated below, in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.			
Typed or Printed Name	David W. O'Bryant		
Signature	<u>David W. O'Bryant</u>	Date	<u>9/27/04</u>